Supplement to the Annual Report of California Municipalities

| City Name: | | | |
|---|---|---|--|
| Marila (l. a. a. a. a. a. | and a bank to be a second | 1 | |
| | opriate box below to indicate the <u>er</u> that period only. | ding date of your agency's fiscal year. | |
| | ☐ June 2015 | September 2015 | |
| Return this form to the California State Controller's Office. If you have any | | | |
| questions regarding this form please contact: | | | |
| ι | J.S. Bureau of the Census, Michael | Osman, 1-800-242-4523 | |

1. Reference: State Controller's Report – Please refer to your State Controller's Report to answer questions A-D.

Section A: From the Schedule of Net Expenditures, General Government (Legislative) – Indicate the operating expenditures (Column A) and capital outlay amounts (Column B) you included in the 'Legislative' field that relate to the financial administration (i.e. finance director, city auditor, treasurer; central accounting and purchasing services, budgeting, etc. - including related data processing) of your government, if any.

| Column A – Operating Expenditures: | E23 | \$ |
|---|-----|----|
| Column B – Capital Outlay Amount: Equipment and | G23 | \$ |
| Land | | |
| Construction | F23 | \$ |

Section B: From the Schedule of Net Expenditures, General Government (Legislative) – Indicate the operating expenditures (Column A) and capital outlay amounts (Column B) you included in the 'Legislative' field that relate to the city attorney and prosecution (exclude probation and parole), if any.

| Column A – Operating Expenditures: | E25 | \$ |
|---|-----|----|
| Column B – Capital Outlay Amount: Equipment and | G25 | \$ |
| Land | | |
| Construction | F25 | \$ |

Section C: From the Schedule of Net Expenditures, General Government (Management and Support) – Indicate the operating expenditures (Column A) and capital outlay amounts (Column B) you included in the 'Management and Support' field that relate to the financial administration (i.e. finance director, city auditor, treasurer; central accounting and purchasing services, budgeting, etc. - including related data processing) of your government, if any.

| Column A – Operating Expenditures: | | \$ |
|---|-----|----|
| Column B – Capital Outlay Amount: Equipment and | G23 | \$ |
| Land | | |
| Construction | F23 | \$ |

Section D: From the Schedule of Net Expenditures, Public Safety (Police) – Indicate the operating expenditures (Column A) and capital outlay amounts (Column B) you included in the

'Police' field that relate to the city attorney and prosecution (exclude probation and parole), if any.

| Column A – Operating Expenditures: | E62 | \$ |
|---|-----|----|
| Column B – Capital Outlay Amount: Equipment and | G62 | \$ |
| Land | | |
| Construction | F62 | \$ |

2. Intergovernmental Expenditures

Indicate the recipient agency, purpose, and the amount of intergovernmental payments over \$100,000 made by your government during the year.

| Paid to: | Purpose: | Amount: |
|----------|----------|---------|
| a. | | |
| b. | | |
| c. | | |
| d. | | |

 $U.S.\ Bureau\ of\ the\ Census-Revised\ 10/20/2015$

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